



2850 Dairy Dr.
Ste. 100
Madison, WI
53718

Telephone
608-224-0606

Fax
608-224-0607
www.cwag.org

Coalition of Wisconsin Aging Groups
Advocacy Membership Legal Services

Testimony on September 11, 2008 of
Attorney John Hendrick of the
Coalition of Wisconsin Aging Groups before the
U.S. Senate Special Committee on Aging

Introduction

Good morning, my name is John Hendrick and I am a staff attorney with the Coalition of Wisconsin Aging Groups, or as we refer to it, "CWAG". I first want to thank you for giving CWAG the opportunity to testify before the U.S. Senate Special Committee on Aging regarding the 1-800-MEDICARE telephone service. We applaud the Committee's efforts and we hope that our input will assist the Committee in ensuring that 1-800-MEDICARE is a quality service for beneficiaries. Before discussing 1-800-MEDICARE, however, I thought some background regarding CWAG might be useful.

CWAG description

CWAG is a membership non-profit started in 1978 and our current membership includes over 560 groups, 119 businesses and 8,300 individuals. Our mission is to pursue justice and quality of life for people of all ages through legal and legislative advocacy, education and leadership development.

One of CWAG's primary services is to provide free legal assistance to 75,000 Wisconsin seniors annually through programs such as the Elderly Benefit Specialist Program (which is a federal and state mandated advocacy program) and the Medicare Part D Helpline Project. As part of their duties, all our specialists function as SHIP counselors under the Wisconsin State Health Insurance Assistance Program (SHIP). They assist beneficiaries in dealing with 1-800-MEDICARE.

1-800-MEDICARE is improving

Based on our experience, CWAG believes that the 1-800-MEDICARE service has improved since 2006. Wait times outside of the Annual Enrollment Period can be as little as 5-10 minutes long. Knowledgeable and experienced 1-800-MEDICARE Customer Services Representatives (CSRs) are usually able to resolve most beneficiary problems in a timely and accurate manner. Successful recent examples include a situation where a CSR resolved a prescription drug plan problem within 15 minutes and a CSR fixing a coordination-of-benefits problem within 48 hours so that a beneficiary was able to receive desperately needed prescription drugs. In addition, we have also had a high level of success when utilizing Medicare "benefit specialists" in situations where CSRs could not solve the problem. CWAG believes, therefore, that 1-800-MEDICARE is moving in the right direction in solving some of its past problems.

Problems with 1-800-MEDICARE

2850 Dairy Drive • Suite 100 • Madison, WI 53718-6742
608/224-0606 • Fax 608/224-0607 • cwag@cwag.org

CWAG believes, however, that there are still three areas where 1-800-MEDICARE needs improvement, these being: 1) Accuracy of information given to beneficiaries; 2) Technical problems with the service; and 3) Programmatic issues. The first problem, accuracy of information, detracts from the quality of the service. The second two problems, technical and programmatic, create barriers for beneficiaries accessing services. All three, obviously, lessen the value of 1-800-MEDICARE.

1. Accuracy of information

CWAG believes that the area of greatest concern for 1-800-MEDICARE is the lack of consistency in the accuracy of information dispensed by CSRs to beneficiaries. The inaccuracy of information does not result from the complexity of the issue but rather which CSR is providing advice. There are, however, areas where we frequently encounter errors such as the rules regarding Special Election Periods (SEPs) for Part D and CSRs omitting important Part D details such as “step therapy” restrictions which require beneficiaries to prove they have tried other drugs before Part D will provide coverage. Since the inaccuracy of information appears to be less a product of issue complexity and more a function of the individual CSR, it is widely unpredictable.

2. Technical problems

The second area that needs improvement is technical problems with 1-800-MEDICARE which include problems such as:

- Average wait times of being on hold when calling can be up to 30 minutes;
- Occasional buzzing on the line so that beneficiaries cannot hear the CSR; and
- Senior beneficiaries having difficulty with the telephone prompt system.

These types of technical problems can obviously create significant barriers to beneficiaries using the service.

3. Programmatic issues

The final area that needs improvement is programmatic issues which appear to be a result of a management decision and/or training. These include items such as:

- CSRs not leaving return phone numbers so beneficiaries must start the process over unless they are available for a return call;
- One fourth of cases are being forwarded to a Medicare “benefit specialist” because they cannot be solved by the CSR;
- Beneficiaries are not called back when filing a complaint about Part D or Medicare Advantage enrollment although 1-800-MEDICARE promises a call back within 5 days; and
- CSRs frequently not knowing that they can (and should) discuss problems with SHIP counselors without beneficiaries being in the room with the SHIP counselor.

CWAG believes that while these problems are significant, they can be fixed.

Recommendations for improving 1-800-MEDICARE

As a result of the problems we have experienced in Wisconsin, CWAG would respectfully submit the following recommendations for improving 1-800-MEDICARE:

- Increasing the number of CSRs to decrease wait times;
- Increasing training for CSRs to improve accuracy of information;
- Continuing with SHIP-dedicated 1-800-MEDICARE line;
- Increasing the number of “benefit specialists” at 1-800-MEDICARE so they can use their higher level of knowledge and competency to resolve complex issues and lift that burden from CSRs;
- Maintaining U.S. Government Accountability Office oversight by evaluating the quality and accuracy of information through the “secret shopper” program; and
- Requiring all Prescription Drug and Medicare Advantage plans to have SHIP-dedicated contact lines and representatives. While this isn’t necessarily part of the 1-800-MEDICARE issue, we believe it crucial to furthering the above recommendations and improving overall service.

We believe that these recommendations would go a long way towards ensuring a quality service experience for those using 1-800-MEDICARE.

In conclusion, I want to thank you again on behalf of CWAG for allowing us the opportunity to participate in this hearing and I am happy to offer our organization as a resource in the future should the U.S. Senate Special Committee on Aging have further questions.

Respectfully submitted,
John Hendrick, Attorney
Coalition of Wisconsin Aging Groups.